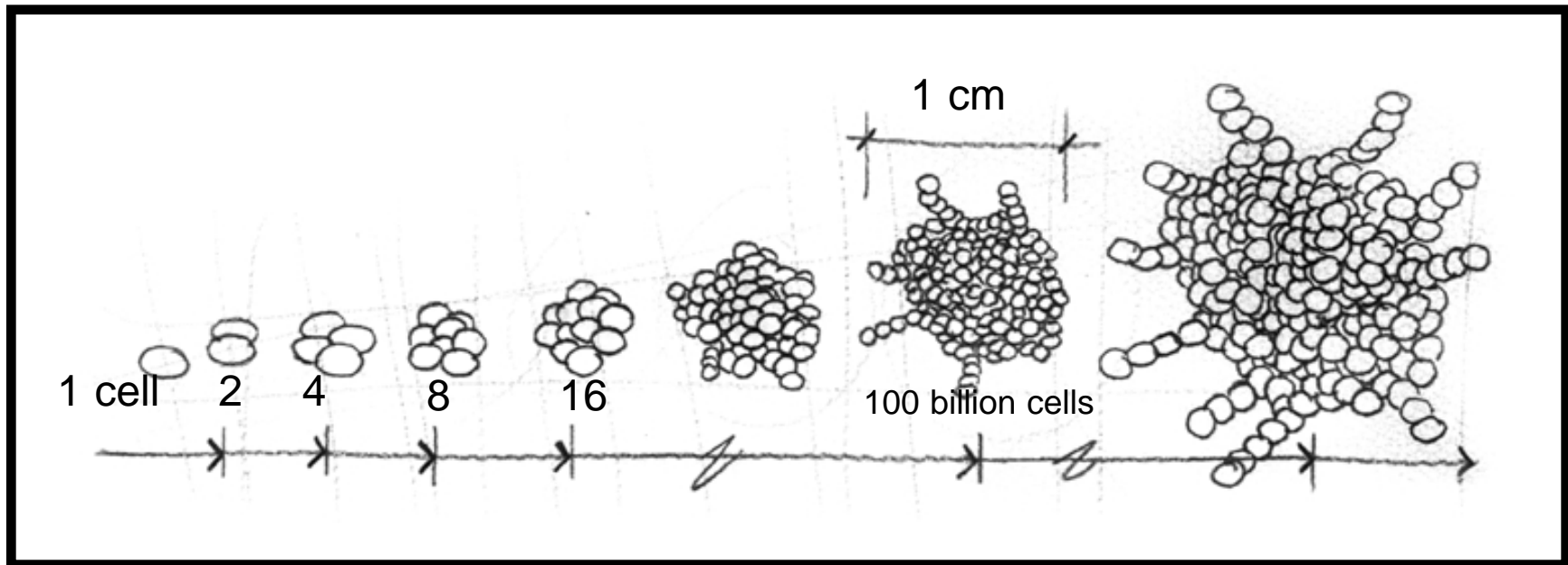


# **Key Facts About Finding Breast and Cervical Cancer Early**

# Cancer Cell Growth



# Risk Factors for Breast Cancer

**First child born  
after age 30**

**Never had  
a child**

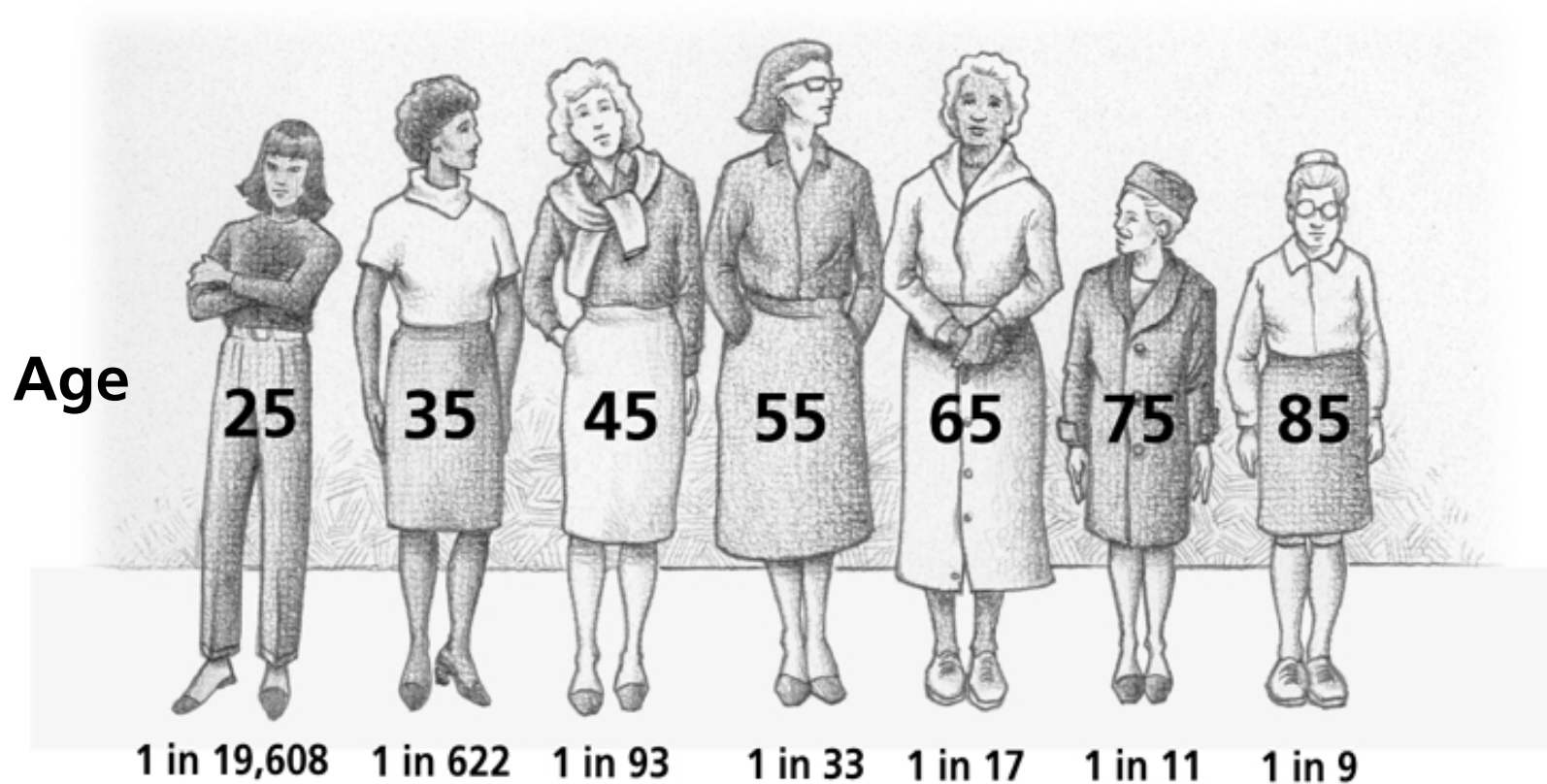


**Early  
periods**

**Late change  
of life**



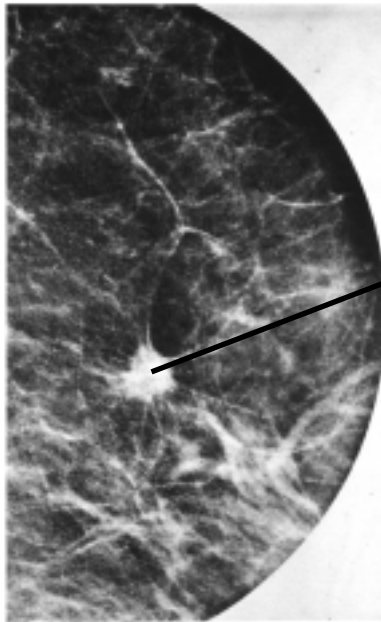
# Chances of Developing Breast Cancer



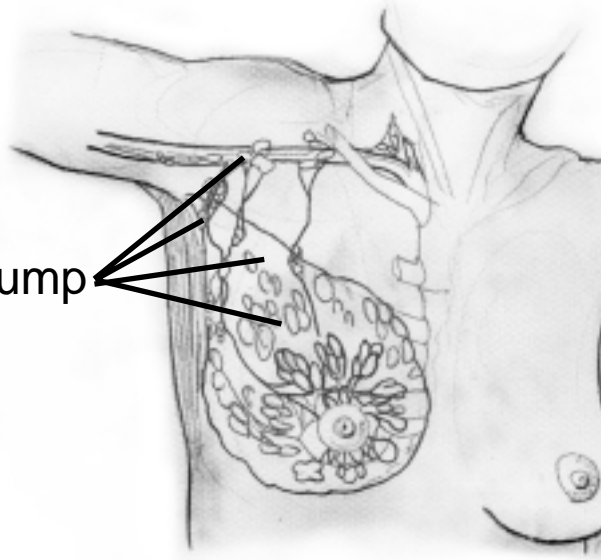
# The Role of Race and Income



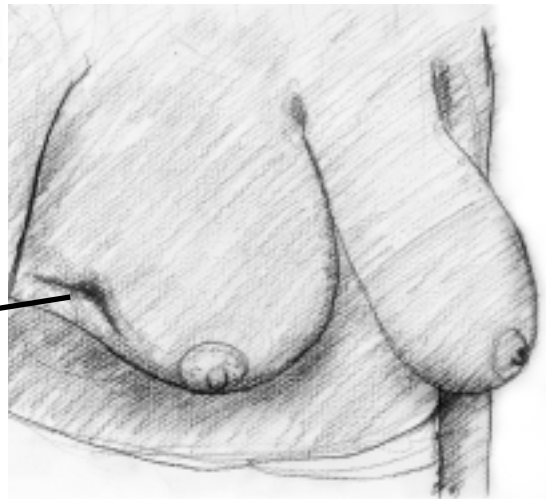
# Symptoms of Breast Cancer



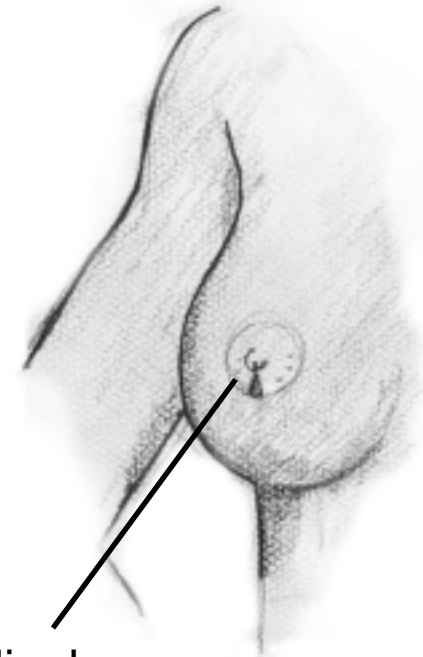
Lump



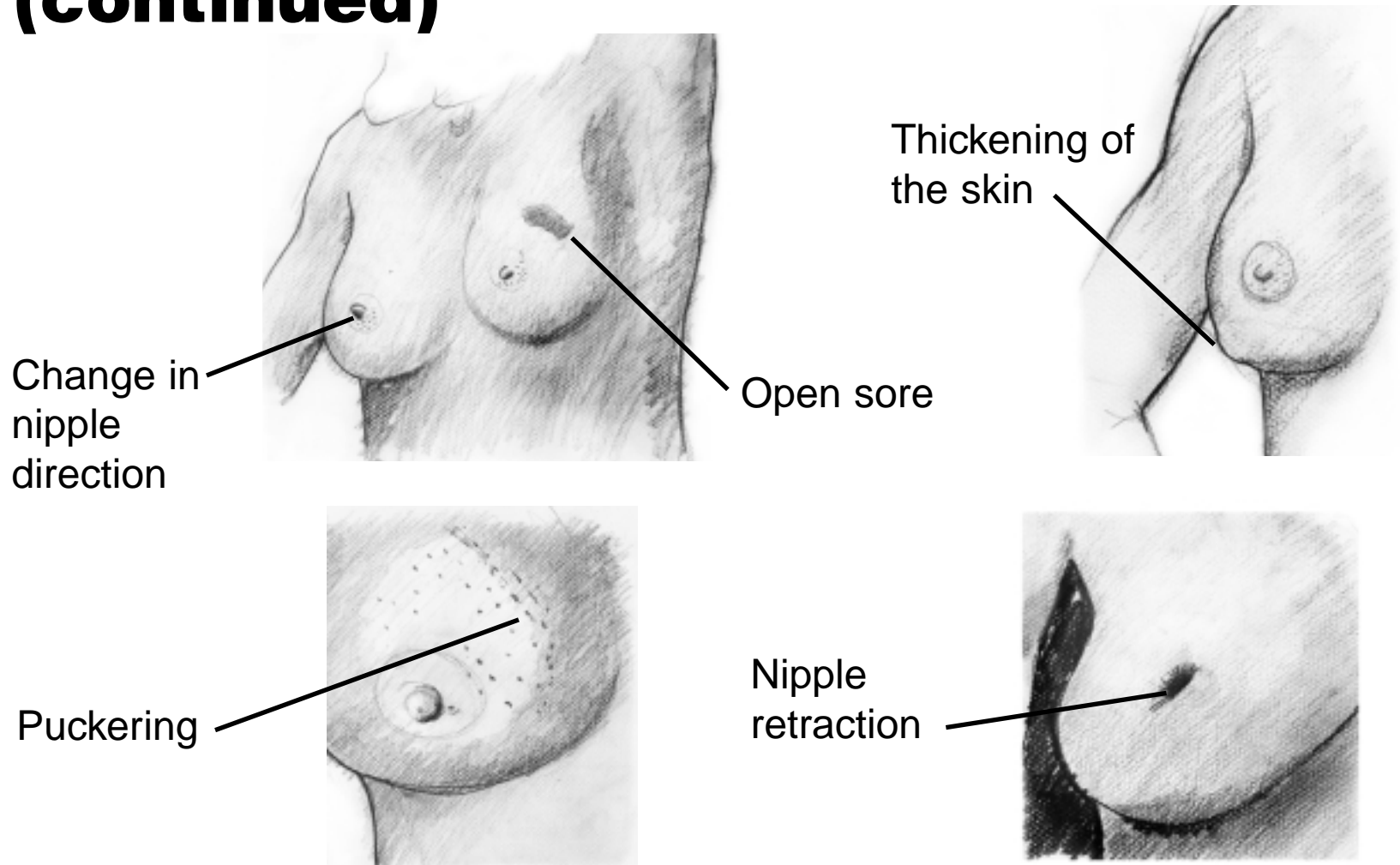
Dimpling



Nipple discharge



# Symptoms of Breast Cancer (continued)



# **NBCCEDP Screening Recommendations**

<b>Women age 50 and older</b>	<b>Women age 40 to 49</b>	<b>Women under age 40</b>
<b>BSE monthly</b>	<b>BSE monthly</b>	<b>BSE monthly starting at age 20</b>
<b>CBE yearly</b>	<b>CBE yearly</b>	<b>CBE every 3 years or as advised by provider</b>
<b>Mammography yearly</b>	<b>Mammography as advised by provider</b>	<b>Routine mammography not advised</b>

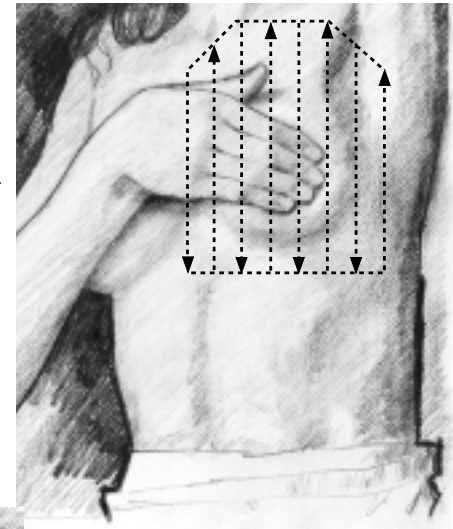


# Screening Methods for Breast Cancer



◀ Clinical  
breast exam

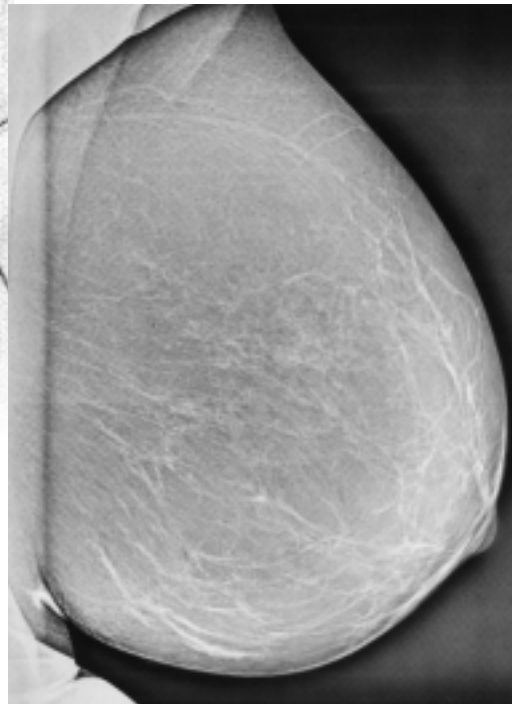
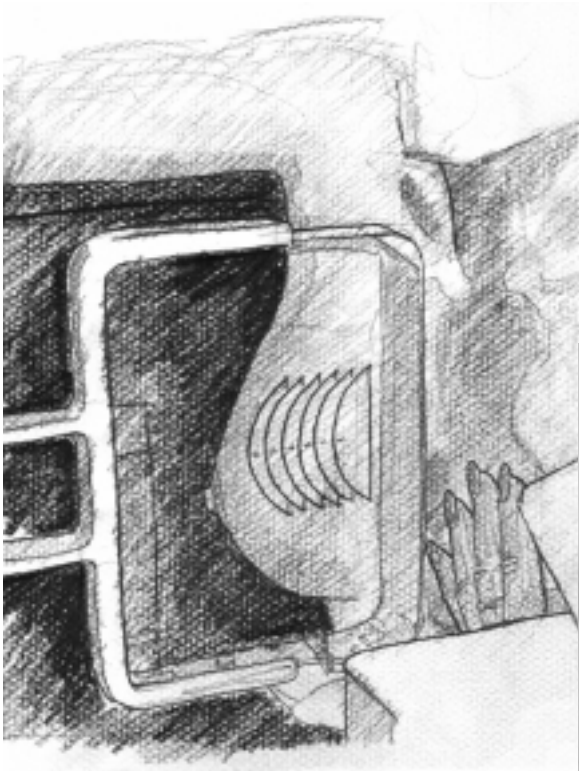
Breast  
self-exam ▶



Mammography ▶



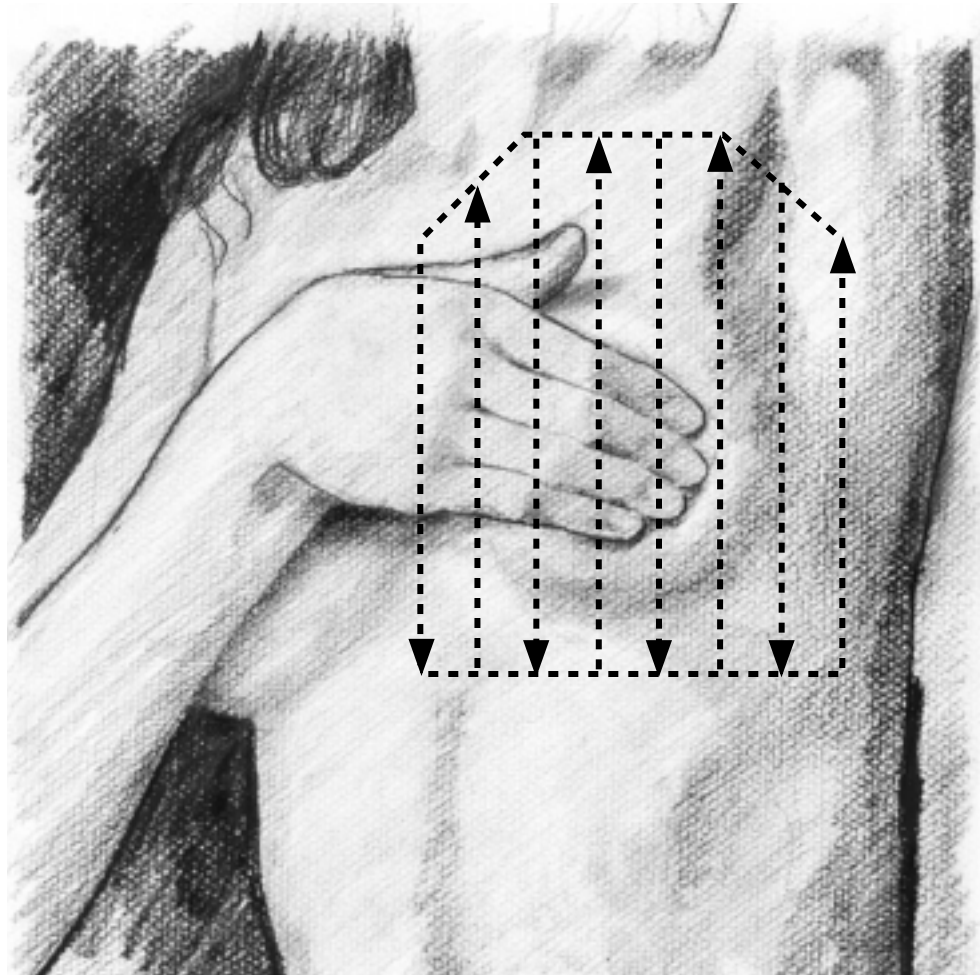
# Mammography





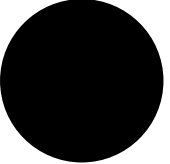
# Clinical Breast Exam



# Breast Self-Exam



# Advantages of Mammography

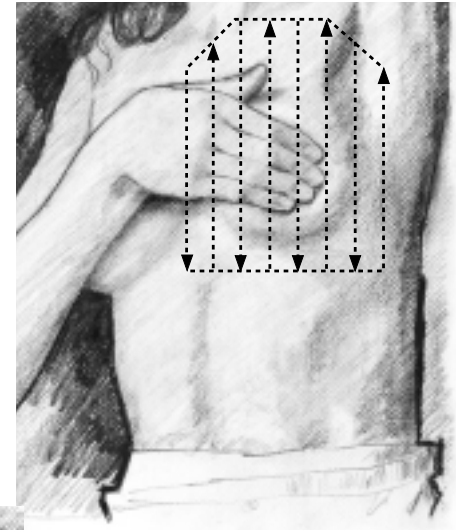
Average-size lump found by getting regular mammograms •	Average-size lump found by women practicing occasional BSE 
Average-size lump found by first mammogram •	
Average-size lump found by women practicing regular BSE 	Average-size lump found by women untrained in BSE 

# Good Breast Health Care



◀ Clinical  
breast exam

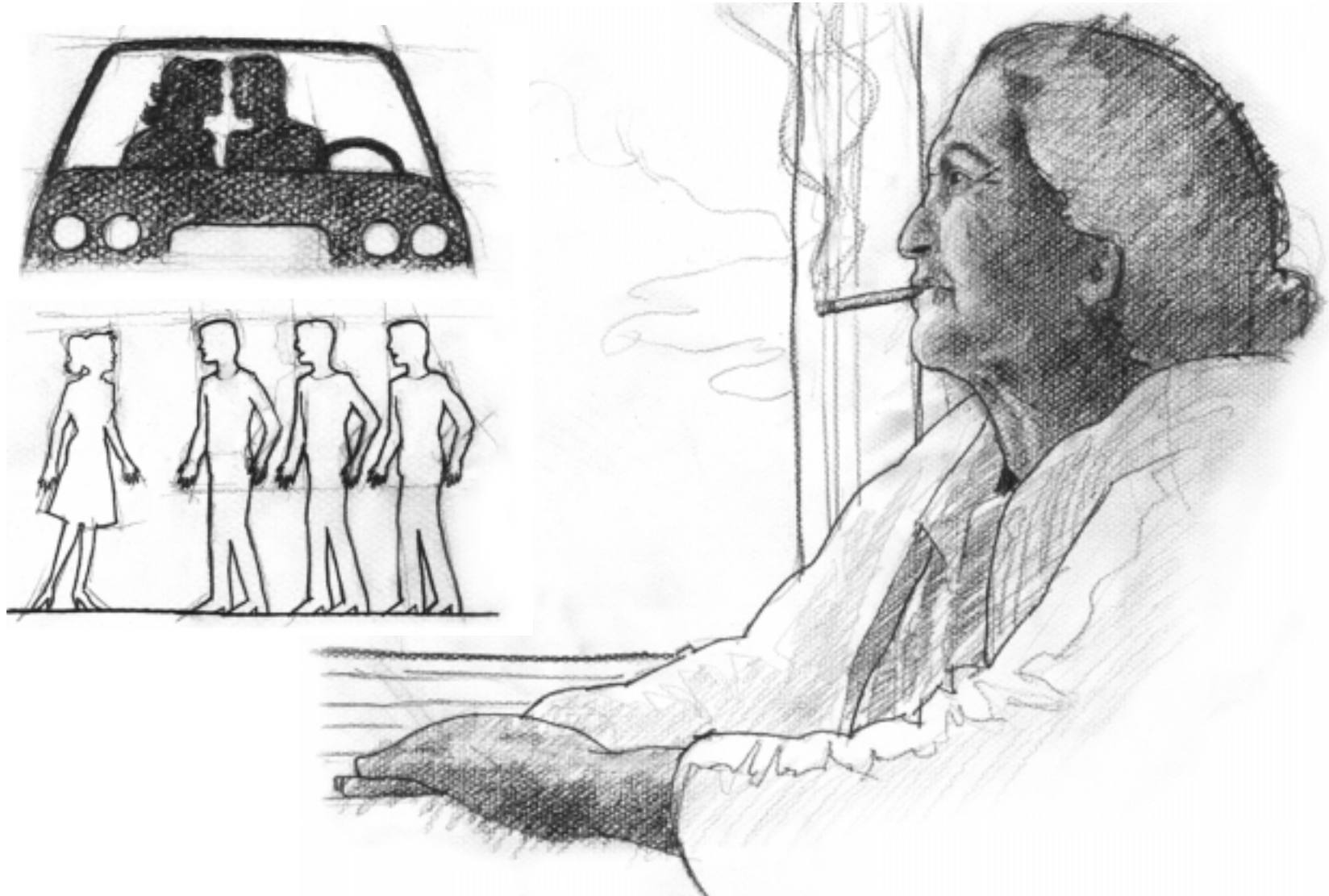
Breast  
self-exam ▶



Mammography ▶



# Risk Factors for Cervical Cancer



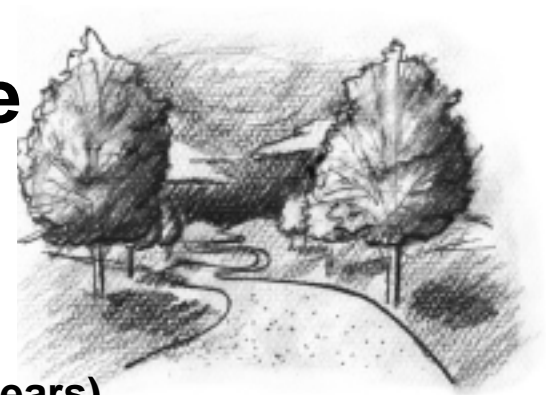
# **Risk Factors for Cervical Cancer (continued)**



- Increasing age
- Lack of education
- Low income
- Lack of access to care
- Failure to receive regular screening



(have not had a Pap test in the last 5 years)

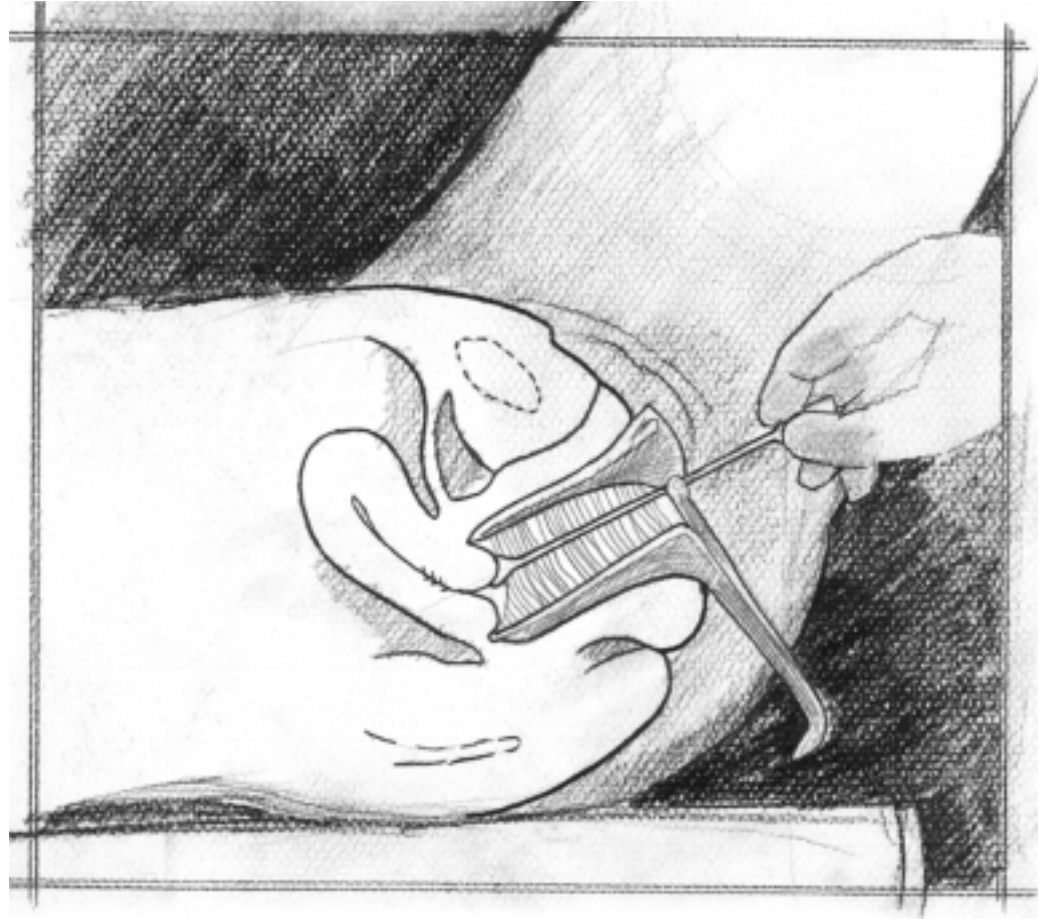
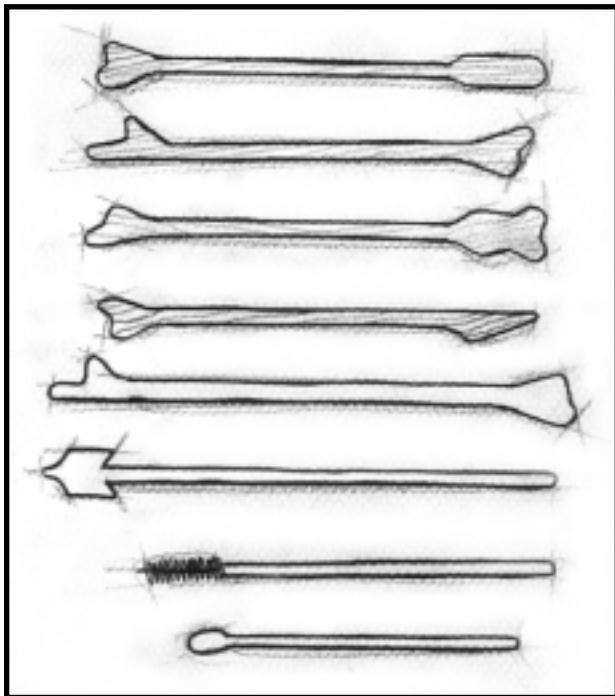




# Screening Method for Cervical Cancer—The Pap Test



# Cell Samples



# **Summary Points**

- **Extra effort is needed to reach older women who do not get screened for cervical cancer every year.**
- **Older women are at greatest risk for getting and dying from cervical cancer.**

# **Barriers to Breast and Cervical Cancer Screening**

# **Categories of Barriers to Breast and Cervical Cancer Screening**

- **Economic**
- **Structural**
- **Informational**
- **Cultural and individual**

# **Summary Points**

- **There are four categories of barriers.**
- **Barriers to screening can be removed.**
- **More than education is needed to remove barriers to screening.**

## **Summary Points (continued)**

- **A woman's culture needs to be considered.**
- **Community health workers help women help themselves get screened.**

# **Encouraging Women To Get Screened for Breast and Cervical Cancer**



# **Five Stages of Behavior Change**

- **Precontemplation (not thinking about it)**
- **Contemplation (thinking about it)**
- **Preparation  
(getting ready for action)**
- **Action**
- **Maintenance**

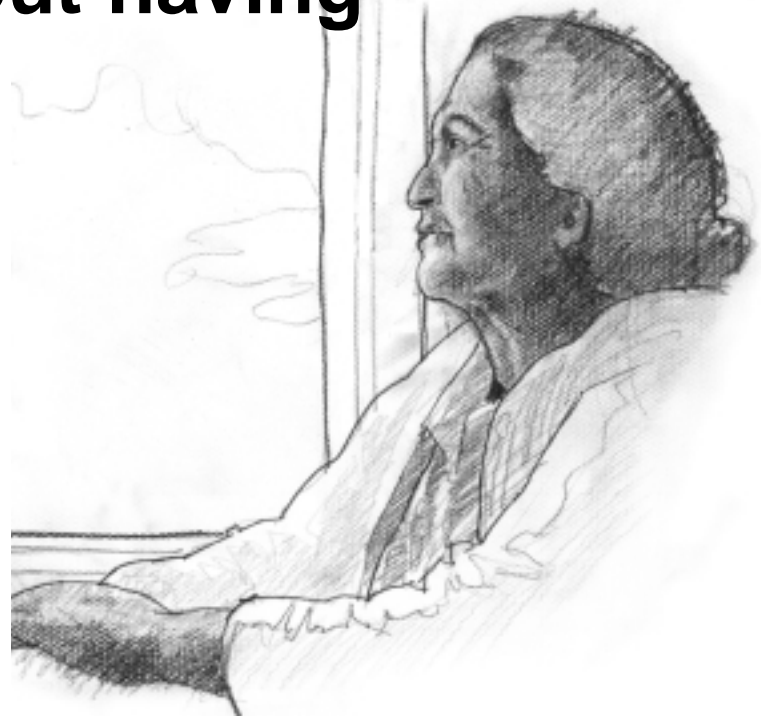
## **Stage 1: Precontemplation (not thinking about it)**

**The woman is unaware of the behavior and risks associated with not having the screening test. She has not thought about change.**



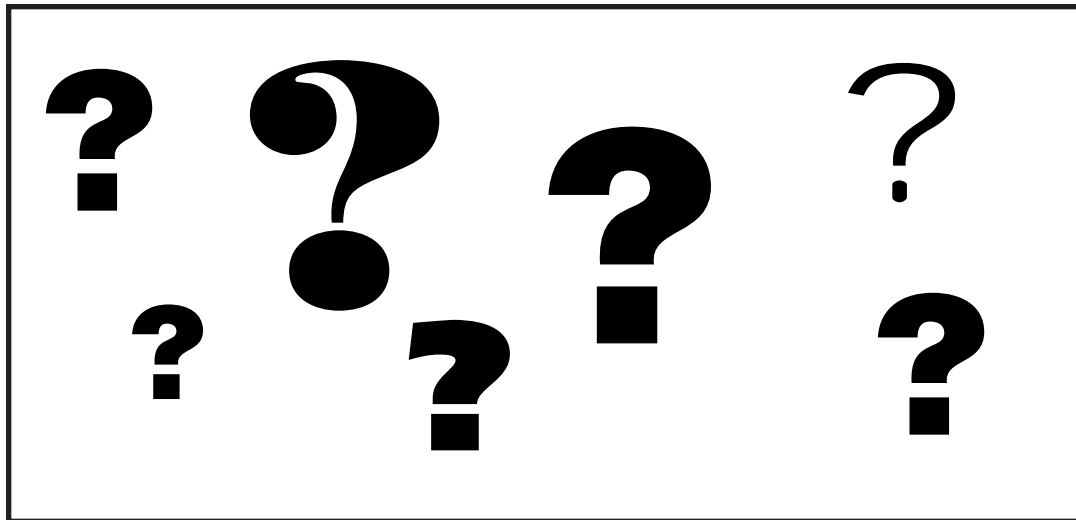
## **Stage 2: Contemplation (thinking about it)**

**The woman is thinking about making the change in the near future. She is not sure about having the tests.**



## **Stage 3: Preparation (getting ready for action)**

**The woman is planning to change or act.  
She is willing, ready, and motivated to be  
screened.**



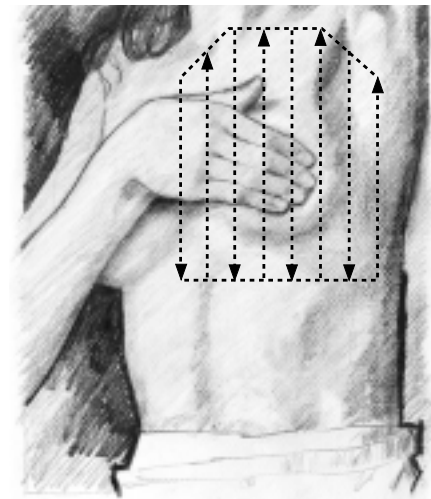
## **Stage 4: Action**

**The woman is  
implementing a  
specific action plan.**



## Stage 5: Maintenance

The woman is taking actions or repeating recommended steps. A woman who misses a screening appointment is in relapse.



# Summary Points

